

# Site Development Application

757 Carolyn Avenue, Columbus, Ohio 43224  
Phone: 614-645-8458 • Fax: 614-645-0333 • [www.bzs.columbus.gov](http://www.bzs.columbus.gov)

**ALL FEES ARE NON-REFUNDABLE • Please type or print all information**

**Review Type: (Please check only one)\***

**Date:** \_\_\_\_\_

☐ Preliminary Site Compliance  
☐ Final Site Compliance

☐ Street Construction  
☐ Storm

☐ Water Main  
☐ Sanitary

☐ Grade & Fill  
☐ Lot Split

**Project Information:**

Project Title \_\_\_\_\_

Tax District/Parcel\*\* \_\_\_\_\_

Certified Address, City, State & Zip \_\_\_\_\_

Zoning Classification & Case Number \_\_\_\_\_

Do you have a re-zoning, council variance or Board of Zoning Adjustment variance pending or approved? ☐ Y • ☐ N

If "Yes", please provide the Tracking Number: \_\_\_\_\_

Have you previously submitted any plans for this site? ☐ Y • ☐ N: If "Yes", please provide the Application Number: \_\_\_\_\_

Are you submitting a Building Permit at this time? ☐ Y • ☐ N: If "Yes", please provide the Application Number: \_\_\_\_\_

**Proposed Work** (for this application): \_\_\_\_\_

**Applicant (Contact):** ☐ Owner ☐ Developer ☐ Agent ☐ Design Professional

Name \_\_\_\_\_

Street Address, City, State & Zip \_\_\_\_\_

Telephone Number \_\_\_\_\_

E-Mail Address\*\* \_\_\_\_\_

**Project Developer:**

Company w of Primary Contact (please print) \_\_\_\_\_

Street Address, City, State & Zip \_\_\_\_\_

Telephone Number \_\_\_\_\_

E-Mail Address\*\* \_\_\_\_\_

**Design Professional:**

Company Name \_\_\_\_\_

Name of Primary Contact (please print) \_\_\_\_\_

Street Address, City, State & Zip \_\_\_\_\_

E-Mail Address\*\* \_\_\_\_\_

Telephone Number \_\_\_\_\_

**Submit a separate application form for each type of review.**

**\*\*Required Information: PLEASE NOTE: Incomplete information will result in the rejection of this submittal.**

For all questions regarding this form please call: 614-645-8458

**Please make checks payable to the Columbus City Treasurer**

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## Property Owner:

\_\_\_\_\_  
Name

\_\_\_\_\_  
Street Address, City, State & Zip

\_\_\_\_\_  
Telephone Number

\_\_\_\_\_  
Fax Number

\_\_\_\_\_  
E-Mail Address\*\*

## For Final Site Compliance Plan Review & Lot Split Only\*\*:

Please provide your method of Payment: ☐ Check • ☐ Credit Card • ☐ SOFT Account Payment

**If payment will be made through a SOFT Account, please provide the following:**

\_\_\_\_\_  
Soft Account# PIN#

\_\_\_\_\_  
Soft Account Authorized Signature

## Submission Requirements:

### Preliminary Site Compliance Plans

- ☐ 15 copies of the plan
- ☐ application form

### Water Main

- ☐ 8 copies of the plan
- ☐ application form
- ☐ CD with the DWG and TIF images

### Final Site Compliance Plans

- ☐ 15 copies of the plan
- ☐ application form
- ☐ check prints from preliminary site plan meeting
- ☐ zoning text for L, PUD & CPD zonings
- ☐ Certificate of Appropriateness (if applicable)
- ☐ review fee

### Preliminary and Final Plats

- ☐ 20 copies of the plat
- ☐ application form
- ☐ review fees

### Storm or Sanitary (CC) Plans

- ☐ 8 copies of the plan
- ☐ application form
- ☐ CD with the DWG and TIF images
- ☐ Storm report or sanitary calculations

### Grade and Fill Plans

- ☐ 15 copies of the plan
- ☐ application form
- ☐ fee

### Street Construction (Drawer E) Plans

- ☐ 10 copies of the plan
- ☐ application form
- ☐ CD with the DWG and TIF images
- ☐ bench circuit
- ☐ scope of services from Planning & Operations

### Lot Splits

- ☐ 1 original legal description and survey plat
- ☐ 6 copies of legal description and survey plat
- ☐ application form
- ☐ fee